

## PREVENTATIVE MAINTENANCE PROGRAM CHECKLIST

### EXPANSION TANKS

**SITE AND BLDG #:** NY070N02
**MECHANIC SIGNATURE:** James R Groft Jr
**DATE:** 09/30/2025

**LOCATION/RM #:** WO# 19926
**ASSET #** 4855
**START TIME:**                     
**FINISH TIME:**                     

| CHECK POINT                                | CHECKPOINT DESCRIPTION                                                                                                                                      | TASK COMPLETE |    | NOTES/ ACTIONS<br>(IF TASK COMPLETE IS CHECKED NO, PROVIDE EXPLANATION) |                                                                                     |
|--------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----|-------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
|                                            |                                                                                                                                                             | YES           | NO |                                                                         |                                                                                     |
| SPECIAL INSTRUCTIONS                       |                                                                                                                                                             |               |    |                                                                         |                                                                                     |
| 1                                          | Follow lock out/tag out procedures at all times. De-energize or discharge all hydraulic, electrical, mechanical, or thermal energy prior to beginning work. | X             |    |                                                                         |                                                                                     |
| TO BE PERFORMED AT EACH INSPECTION SERVICE |                                                                                                                                                             |               |    |                                                                         |                                                                                     |
| 1                                          | Examine exterior of tank including fittings and valves for leaks, signs of corrosion, and correct as needed.                                                | X             |    |                                                                         |  |
| 2                                          | If applicable, Check sight glass, insure level is between 1/2 and 3/4 sight glass. Correct as needed.                                                       |               | X  | NA                                                                      |                                                                                     |
| 3                                          | If applicable, check tank pressure via schrader valve. Correct as needed.                                                                                   | X             |    |                                                                         |                                                                                     |



Note: The technician shall perform any repairs identified during PM up to \$250 (direct labor and direct material cost) per PM occurrence. For any deficiencies found exceeding \$250 open a corrective maintenance (CM) ticket and include the Asset #, WO #, photos, and a detailed discription of the deficiency.

To be performed by: General Maintenance Worker

**Additional Notes:**